ľ

3(CHEDULE B (FEC Form 3X)	FOR		FOR LINE I	LINE NUMBER: PAGE 69 OF 70		
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the		(check only one)			
			Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b	
Δ-	y information copied from such Reports and Statem	ante mou r	not he sold or use				
	for commercial purposes, other than using the nam						
	NAME OF COMMITTEE (In Full)						
	Associated Builders and Contractor	rs Politio	cal Action Co	ommittee (A	ABC PAC)		
	Full Name (Last, First, Middle Initial)				Date of Disbursement		
Α.	MAJORITY COMMITTEE PAC (MC PAC)						
	Mailing Address P.O. Box 10134				02 12	2015	
	City State Zip Code				Transaction ID : 22298359		
	Zanorono	CA	93389		Transaction iD .	22290339	
	Purpose of Disbursement Political Contribution			011	Amount of Each D	isbursement this Period	
	Candidate Name			Category/		5000.00	
	MAJORITY COMMITTEE PAC (MC Office Sought: House Disbursem			Туре	7	, i	
	Senate	Primary Other (spec	General cify) ▼		Political Contribution	ו	
_	Full Name (Last, First, Middle Initial)						
В.	Bluegrass Committee			Date of Disbursement			
	Mailing Address 220 1/2 E Street, NE				02 12 2015		
	Washington	State DC	Zip Code 20002		Transaction ID :	22298360	
	Purpose of Disbursement Political Contribution			011	Amount of Each Disbursement this Period		
	Candidate Name		Category/		5000.00		
	Bluegrass Committee Type Office Sought: House Disbursement For:				7	30000	
	Senate	Primary Other (spec	General cify) ▼		Political Contribution	n	
_	Full Name (Last, First, Middle Initial)				Date of Disbursem	ont	
U.	CMR Political Action Committee				M M / D D / Y Y Y Y		
	Mailing Address P.O. Box 2485				02 12	2015	
	City State Zip Code Springfield VA 22152-0485				Transaction ID : 22298361		
	Purpose of Disbursement						
	Political Contribution 011			Amount of Each Disbursement this Period			
				Category/	5000.00		
	CMR Political Action Committee Office Sought: House Disbursement For:			Туре		000.00	
	Senate	Primary Other (spec	General cify) ▼	Political Contribution			
_	State: District:						
H	UBTOTAL of Disbursements This Page (optional) OTAL This Period (last page this line number only).					15000.00	